



Date: \_\_\_\_\_  
 Fundraising Activity: \_\_\_\_\_  
 Budget Category: \_\_\_\_\_

**PTA FUNDS RECEIVED FORM**

**FUNDS RECEIVED**

COINS \$ \_\_\_\_\_

CURRENCY \$ \_\_\_\_\_

CHECKS \$ \_\_\_\_\_

**TOTAL FUNDS RECEIVED** \$ \_\_\_\_\_

The undersigned certify that the funds shown above were received for PTA activities and properly accounted for in accordance with the PTA Money Management Policy and are to be credited to the appropriate PTA account as noted.

Signature of Counter: \_\_\_\_\_

Signature of Counter/Witness: \_\_\_\_\_

Committee Chair Signature: \_\_\_\_\_

Funds Forwarded to Treasurer on \_\_\_\_\_ by \_\_\_\_\_

**FOR TREASURER'S USE ONLY**

Amount Received: \_\_\_\_\_ Date: \_\_\_\_\_

Specific Budget Item(s) Credited \_\_\_\_\_

Comments: \_\_\_\_\_

Treasurer's Signature: \_\_\_\_\_